United States District Court

for the

Eastern District of Tennessee

Dr. Kely Brooke Maan

Civil Action No. 3: 24-CV-75

The University of Tennessee 201 Andy Holf Tower Knoknile, The 37996 SUMMONS

To: (Defendant's rame and address)

The University of Tehnosec 201 Andy Holf Tower Knoxwile, TV 37996

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Dr. Kely Brooke Marin 803 W. 1st Avenue Lenoir Cry, TN 37771

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Signature of Clerk or Deputy Clerk

#: 25

Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

I personally served the su	mmons on the individual	at (place)	
		on (date)	; or
☐ I left the summons at the	individual's residence or	usual place of abode with (nan	ne)
	, a perso	on of suitable age and discreti	on who resides there,
on (date)	, and mailed a copy to	the individual's last known a	ddress; or
☐ I served the summons on	(name of individual)	r viet re	, who is
designated by law to accept	service of process on bel	nalf of (name of organization)	
· , , , , , , , , , , , , , , , , , , ,	•	on (date)	; or
☐ I returned the summons u	nexecuted because	-y - 1	; or
T Other (specify): Cavi	ied mail h	th Signature	
☑ Other (specify): Cavi	* *	for services, for a	
☑ Other (specify): Cavil	for travel and \$	for services, for a	
Other (specify): Carry My fees are \$ I declare under penalty of pe	for travel and \$	for services, for a	total of \$ 0.00
☑ Other (specify): Cavi	for travel and \$	for services, for a	total of \$ 0.00

SENDER: COMPLETE THIS SECTION ■ Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: The university of Tennessee Jol Andy Holf Tower Knoxuir, TN 37916.

9590 9402 8306 3094 9299 93

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2. Article Number (Transfer from service label)

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	COMPLETE THIS SECTION ON D	ELI	VERY			
	A. Signature X. M. Shaffer B. Received by (Printed Name)		☐ Agent ☐ Addres C. Date of Deliv	_		
	MShaffer		2.21			
	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No					
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(over \$500) 3 of 3

Registered Mail Restricted Delivery ☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

GEID Domestic Return Receipt

Case 3:24-cv-00075-KAC-JEM De